

TC4940

POSITION	ID NO.	DATE
FEE DETERMINATION		
O.I.P.E. CLASSIFIER		
FORMALITY REVIEW		
RESPONSE FORMALITY REVIEW		

~~Best Available Copy~~

## INDEX OF CLAIMS

- ✓ ..... Rejected N ..... Non-elected
- = ..... Allowed I ..... Interference
- (Through numeral)... Canceled A ..... Appeal
- ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	9/28/01
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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JL  
1/29/01  
RESP  
SSB  
4/18/01